CANNON COUNTY REGIONAL PLANNING COMMISSION 200 WEST MAIN STREET, WOODBURY, TN 37190

OFFICE: (615) 563-2320

APPLICATION FOR SPECIAL EXCEPTION \$300 Fee									
Applicant's Name									
Applicant's Mailing Address					City		State	Zip	
Phone Number		Fax Number			Email				
The applicant is responsible for notifying the Planning Department if any contact information has changed.									
PLEASE COMPLETE THE FOLLOWING PROPERTY INFORMATION: Property Owner (If different from Applicant)									
Property Address					City		State Tennessee	Zip	
Тах Мар	Group		Parcel	Size of	Size of Parcel Deed Book		ed Book	Page	
Present Zoning	of Property	•		Preser	Present Use of Property				
	DI		CAADI ETE TUE I				A A A TIONI		
Please provide the following information. Use an additional sheet of paper, if necessary:									
Explain how yo be protected:	our proposal	will be	designed, loco	ated, and c	perated so t	that the pu	blic health, sa	Ifety and welfare will	

Explain how your proposal will not adversely o	affect other i	property in the area in which it is located:
Explain how your proposal is located in a man those using the facility:	ner that is co	empatible with the surrounding area and provide safety to
mose using the raciity.		
PLEASE NOTE THAT THE BOARD OF ZONING APP	EALS MAY IN	APOSE SUCH OTHER CONDITIONS AND RESTRICTIONS UPON
THE PREMISES BENEFITED BY A SPECIAL EXCEPTI	ON PERMIT	AS MAY BE NECESSARY TO COMPLY WITH THE PROVISIONS
		E OR MINIMIZE THE INJURIOUS EFFECT OF SUCH SPECIAL RROUNDING PROPERTY AND TO BETTER CARRY OUT THE
GENERAL INTENT OF THIS ORDINANCE.	50.	MOONDING PROPERTY AND TO DETER GARRY GOT THE
The following section is for accessory dv	welling units	(ADU). Please SKIP to the next section if this is not
	applic	
Size of proposed ADU (square feet)		Size of principal residence (excluding garage or utility space)
Are there existing detached accessory structu		
If yes, please indicate the total square footage		detached accessory structures:
Which method do you plan to use to create the	ne ADU?	
\square An internal conversion/remodel within α	an existing, c	detached single-family dwelling.
\square Add new square footage to an existing	g single-famil	y dwelling.
\square Include an ADU within a single-family, α	detached dv	velling at the time of its construction. \square Convert an
existing, detached accessory structure.		
\square Construct a separate, detached ADU α	on the same	lot as the primary dwelling unit.
		upied" unit? Principal Dwelling Accessory Dwelling
If the ADU is a new addition or detached build	dina, please	provide elevations of the ADU with the primary dwelling
unit to demonstrate how the ADU matches the		ne existing/principal dwelling with regards to materials,
colors, window styles, and roof styles.		
The following section is for major home based	businesses (and non-residential special exceptions. Please SKIP to the
signatu	re block if th	is is not applicable.
Do you plan to have a sign? ☐ YES ☐ NO	If yes, how	many signs and what size(s)?
Will you employ anyone? ☐ YES ☐ NO	If yes, how	many employees will be on-site?

Do you plan to build any new buildings?	If yes, how many and what siz	If yes, how many and what size?				
What days and hours will your business be	open?					
Will business vehicles be parked on site? ☐ YES ☐ NO	If yes, how many vehicles?	If yes, how many vehicles?				
	What type of vehicles?					
Is there a fire hydrant within 1,000 feet of the If No, can a fire hydrant be installed within		S 🗆 NO				
Is the parking lot to be paved? YES NO						
NOTE BLOOM IN THE ALL OF THE STATE OF THE ST						
NOTE: Please consult with planning staff to Zoning Resolution will be required for your separate variance application to be processTAFF USE ONLY: A variance application is	application. If a variance is require essed along with your special exce	ed then you will need to fill out a				
I HEREBY CERTIFY THAT THE INFORMATION C KNOWLEDGE AND BELIEF.	•	TRUE AND CORRECT TO THE BEST OF MY				
	plicant's Name (Printed)	Date				
PLEASE INITIAL THE FOLLOWING POLICY S	TATEMENTS TO INDICATE THAT YOU	HAVE READ AND UNDERSTAND THEM:				
Applicant Deferral/Withdrawal Policy: If an applicant requests deferral or withdrawal after processing has begun, fees are non-refundable. Applicants requesting a deferral will be charged the cost of preparing and mailing new notices of public hearing. Applicants may not defer an application for a period exceeding three (3) months from the original Board of Zoning Appeals public hearing date of said application. Any application not considered before the three (3) month deferral timeframe will be required to submit a new application, along with any required fees, and will be subject to the regulations in effect at that time.						
		Applicants Initials				
Commission Deferment Policy: When an scheduled meeting of the Board of Zonii scheduled meeting.						
		Applicants Initials				
Typically, special exception application buildings must comply with applicable accessibility.	· · · · · · · · · · · · · · · · · · ·	•				
		Applicants Initials				
The Board, its members, and employee jurisdiction and make examinations ar ordinance.		c, may enter upon any land within its				
		Applicants Initials				
	CHECKLIST					
Before we can accept your special ex		ake sure you have all the items listed				

below:

☐ A completed application.				
☐ A copy of the deed to the property.	☐ A concept plan drawn to scale.			
☐ A Letter of Attorney-in-Fact if submitted by	\square \$300 application fee.			
anyone other than the current land owner.				
STAFF USE ONLY				
Accepted by	Application Number			